SYMPTOM & SIDE-EFFECT TRACKER

A simple way to keep track of changes and share useful information with your healthcare team

TODAY'S INFORMATION

Date: ______________________

Treatment / medication: ______________________

Day of treatment / cycle, if applicable: ______________________

Time symptoms began: ______________________

WHAT AM I EXPERIENCING?

- ☐ Pain or discomfort
- ☐ Nausea
- ☐ Diarrhea
- ☐ Constipation
- ☐ Changes in appetite
- ☐ Difficulty eating or drinking
- ☐ Dizziness or lightheadedness
- ☐ Fever / temperature change
- ☐ Shortness of breath
- ☐ Skin or mouth changes
- ☐ Mood or emotional changes
- ☐ Difficulty concentrating
- ☐ Swelling
- ☐ Other: ______________________

TELL ME MORE

Where am I experiencing it?

____

How long did it last?

____

How often has it happened?

____

Is it getting better, worse, or staying the same?

☐ Better ☐ Worse ☐ About the same

HOW SEVERE IS IT?

Overall severity:

☐ Mild ☐ Moderate ☐ Severe

WHAT SEEMED TO HELP?

____

____

____

What seemed to make it worse?

____

____

Did I take anything for it?

____

____

OTHER CHANGES I NOTICED

Eating / drinking: ______________________

Sleep: ______________________

Energy: ______________________

Mood: ______________________

Daily activities: ______________________

[illegible]

☐ No ☐ Yes – phone ☐ Yes – patient portal ☐ Yes – In person

Who did I speak with? ______________________

When?

What did they recommend? ______________________

____

QUESTIONS FOR MY NEXT APPOINTMENT

1. ______________________
2. ______________________
3. ______________________

IMPORTANT

Which symptoms begins, ask your healthcare team:

Which symptoms should I report immediately?

____

Who should I call during office hours?

____

Who should I call after hours?

____

Which symptoms require emergency medical care?

____

Keep these instructions somewhere easy to find.
If you believe you are experiencing a medical emergency, seek immediate medical care or contact emergency services.

A LITTLE REMINDER

[illegible] than [illegible] decide [illegible] your healthcare team.

When you're concerned, ask.